JCAHO'S PERIODIC PERFORMANCE REVIEW

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PPR

- Assess compliance with all standards
- Score each EP
- Plan of Action for non-compliance
  - Submit to JCAHO for review
  - Telephone interaction with JCAHO staff
  - No change in accreditation status
  - No scores under corrective action plan
  - Measures of success
- Send hard copy of SOC to JCAHO

PLAN OF ACTION

- Similar to Statement of Conditions™
- Identify means to correct non-compliant standards
- Must be corrected prior to triennial survey
  - 12 month track record
- Measures of success as indicated

PPR OPTIONS

- Organization performs PPR
  - Does not submit to JCAHO
  - MOS to JCAHO at triennial survey
- On-site mid-cycle survey
  - No organization PPR
  - MOS to JCAHO at triennial survey
- On-site mid-cycle survey
  - No written documentation

SCORING

Each EP Scored

- Score 2: Meets EP requirement
- Score 1: Partially meets
- Score 0: Does not meet

EP CATEGORIES

- A: EP's scored yes or no
- B: Literal intent is met
  - Need to evaluate quality
  - Need to evaluate comprehensive effort
- C: Score based on number of instances of non-compliance

EP CATEGORIES

- A: Fundamental important concepts
- B: Process and design are important
- C: Implementation issues

CATEGORY A EXAMPLE

- EC.1.10 (2)
  - The hospital identifies a person(s), as designated by leadership, to coordinate the development, implementation, and monitoring of the safety management activities.

CATEGORY B EXAMPLE

- EC.4.10 (21)
  - The (emergency management) plan identifies means for radioactive, biological, and chemical isolation and decontamination.

CATEGORY C EXAMPLE

- EC.5.10 (3)
  - The hospital identifies and implements processes for regularly inspecting, testing, and maintaining fire protection and the fire safety systems, equipment, and components.

BULLETED EP'S

- Score 2: All bulleted requirements met
- Score 1: Any bulleted requirements met
  - Category B & C only
- Score 0: No bulleted requirements met
  - Any bulleted requirement not met for category A

BULLETED EXAMPLE

- EC.4.10 (2): The hospital establishes the following within the community:
  - Priorities among the potential emergencies identified in the hazard vulnerability analysis
  - The hospital's role in relation to a community-wide emergency management program
  - An "all-hazards" command structure within the hospital that links to the community's command structure

TRACK RECORD FOR FULL SURVEY

- Score 2: $\geq$ 12 months record
- Score 1: 6-11 months record
- Score 0: $\leq$ 6 months record

CATEGORY A SCORING

- Requirements exist
- Track record
- Bullets

CATEGORY B SCORING

- Requirements exist
- Bullets
- Track record
- IF there are concerns about quality, assess quality of process design

QUALITY OF PROCESS

- Consistent with mission, values, goals
- Meets needs of patients
- Reflects currently accepted practices
- Incorporates current safety information (e.g. sentinel event data & NPSG)
- Incorporates performance improvement
- Scoring

  All = 2 Some = 1 None = 0

CATEGORY C SCORING

- Compliance ≥ 90%: Score 2
- Compliance 80-90%: Score 1
- Compliance <80%: Score 0

PLUS. . .

- Bullets
- Track record

STANDARDS SCORING

- Compliant
  - > 65% EP’s scored 2
  - AND
  - No EP’s scored 0
- Non-compliant
  - Any EP scored 0
  - OR
  - > 35% EP’s scored 1

2004 SCORING DECISIONS

- Conditional Accreditation
  - # non-compliant standards +2 SD over program mean
- Preliminary Denial of Accreditation
  - # non-compliant standards + 3 SD over program mean

EVALUATION OF COMPLIANCE

- Look at each EP
- Determine category
- Process in place
- Track record documented
- Compliance with bullets
- Quality of process (B)
- Compliance rate (C)

MEASURE OF SUCCESS

- “A numerical or other quantitative measure usually related to an audit that validates that an action was effective and sustained.”
- Indicated for some EP’s
- Must be used if entire standard is not in compliance

MOS SAMPLE SIZE

- <30 cases, sample 100%
- 30-100 cases, sample 30 cases
- 101-500 cases, sample 50 cases
- >500 cases, sample 70 cases

SCORING CHANGES

- Effective July 1, 2004
- Some EP's re-categorized
  - Mostly C to B
- Some bullets changed to multiple EP's
- Many MOS eliminated
- Discussed in August *JCAHO Perspectives*
- Will be included in:
  - update 3 to CAMH
  - 2005-2006 CAMAC
  - PPR tool

MOS ASSIGNMENT

- *THEORETICALLY:*
  - All category C EP’s
  - No category B EP’s
  - Few category A EP’s
- Some exceptions

CATEGORY A MOS: HOSPITALS & AMBULATORY

- EC 6.20 (5): sterilizer performance testing
- EC 6.20 (6): dialysis water testing
- EC.7.30 (2): utility testing before use
- EC.7.30 (3): life support utilities
- EC.7.30 (4): infection control utilities

CATEGORY B MOS: HOSPITALS & AMBULATORY

- EC.2.10 (3): security risk assessment

CATEGORY C EP'S WITHOUT MOS

HOSPITALS & AMBULATORY

- EC.5.30 (4): 50% of drills unannounced
- EC.7.20 (2): exit route illumination
- EC.7.20 (4): illumination of exit signs
- EC.8.30 (1): *AIA Guidelines*

WHERE TO BEGIN?

- Identify scoring category for EP
- Is there any compliance activity?
  - All aspects (bullets)
  - Using quality process design (B)
  - Number of failures (C)
- Length of documentation trail

SOURCES OF INFORMATION

- Management Plan
- Policy and procedure
- Meeting minutes
- Training records
- Reports to committee (problems, failures)
- Maintenance schedules and records
- Performance monitoring
- Manufacturer documentation
- Etc., etc.

SAFETY OFFICER

- EC.1.10 #3-A
- Has a safety officer been appointed?
- For how long?
- Documentation

- EC.1.10 #3-A
- Intervention authority designated?
- When?
- In writing?
- Coverage

SAFETY OFFICER

- EC.9.10 #2-B (6 bullets)
- Task assignments
  - ICES
  - Other information
  - Summaries: Problems, failures, user errors
  - Summaries: Findings, recommendations, actions, PI
  - Hazard surveillance (Environmental tours)
  - Policy & procedure development

SAFETY OFFICER

- Are all responsibilities fulfilled?
- Documented in job description?
- Have all aspects of process design been included?
- Track record

SECURITY ID POLICY

- EC.2.10 #5-C
- Documented policy
  - Patients/residents/clients
  - Staff
  - Physicians
  - Visitors
  - Contractors
- Track record
- Observations of non-compliance

SUGGESTED SCORING EVALUATION

- Compliance with element
- Policy well-founded and well-written
- Documentation of implementation

- Focus on complying with the standards and the EP’s, not the scoring.

PPR QUESTIONS?

UNANNOUNCED SURVEYS

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THANK YOU!

SBM CONSULTING, LTD.